

**FINAL
SUBDIVISION PLAT &
PLAT REVISION

APPLICATION**



January 1, 2015

Beginning July 1, 2012, per Ordinance O12-19, a 2.75% technology fee will be assessed and collected on the total fees for all new and resubmitted applications until **June 18, 2017**.

Stafford County Department of Planning & Zoning

**1300 Courthouse Road
P.O. Box 339
Stafford, VA 22555-0339**

**Phone: (540) 658-8668
Fax: (540) 658-6824**

www.staffordcountyva.gov

Subdivision Final Plat Submittal and Approval Process

1. All Final Plats must be submitted within One (1) year of the Preliminary Plan approval, refer to Section 22-6 of the Subdivision Ordinance for **vesting**.
2. All **amenities** within a certain section must be installed prior to plat recordation per Section 22-134.
3. Once a complete application has been submitted, the fees are verified and the application is logged into our computer system. ***All applications are logged in by the next Monday after submission.***
4. The plans are routed to all appropriate reviewers and State Agencies.
5. A review time deadline is assigned as well as the application number.
6. The plat preparer has two reviews to address all County comments. If comments are not addressed, a 3rd review fee will be required.
7. The applicant is required to submit a Deed (if any Dedication on plat), title work (dated within 90 days), authorization of signature of the deeds and the checklist.
8. The plat preparer will be required to submit a certified cost estimate (by 2nd review) to the planner for routing/review/approval so that the required securities can be posted prior to plat recordation.
9. Securities are required for roads, water, sewer, and monumentation.
10. Once the deeds are in appropriate form, cost estimates and all review comments are addressed, the plats can be signed and recorded. Submit **TEN (10)** sets of the plats, which contain all **original signatures of the OSE, plat preparer, and the owners with proper notarization for recordation**. Fees are required for recordation and Payable to the **Clerk of the Court**.
11. All appropriate departments plan review and comments can be viewed on the Integrated Web Response System (IWR) at **<http://hello.stafford.va.us>**.

Application Submittal Checklist

- ☐ Completed “**Project Information & Primary Contacts**” form
- ☐ Completed “**Final Subdivision Plat Review Fee Calculation**” sheet and appropriate fees payable to “County of Stafford” including **2.75% TECHNOLOGY FEE**.
- ☐ Signed “**Statements of Understanding**” from the owner(s) and applicant
- ☐ Completed “**Checklist for Final Subdivision Plat**”, signed by the plat preparer
- ☐ Eleven (11) 17”x 21” sets of plat
- ☐ Two (2) copies of the soils report and drainfield plat prepared by a licensed On-Site Soil Evaluator (OSE) for each lot not being served by public sewer
- ☐ Electronically formatted computer file containing all information shown on the final plat. The computer file shall conform to standards as determined by the Geographic Information System office for program compatibility. Formatting requirements are available through the Stafford County web page.
- ☐ One (1) Key Map at a scale of 1”=400’ and shall include parcel/lot boundary lines, lot numbers, street names, subdivision name and section number (somewhere within boundary) and address (if assigned). This may be submitted on a separate sheet, no smaller than 8.5x11, and is not required to be a part of the plat.

Effective 5/21/14, all construction plans not approved prior to 5/21/14 are subject to a county-wide transportation impact fee. The following note is required on all approved construction plans:

In accordance with Stafford County Code Chapter 13.5, all dwelling units shall be subject to a Transportation Impact Fee and shall be payable upon the issuance of a building permit.

RECEIVED:

DATE: _____ INITIALS _____

OFFICIALLY SUBMITTED:

DATE: _____ INITIALS _____

Project Information & Primary Contacts

Major SP	<input type="checkbox"/>	Cluster Concept Plan	<input type="checkbox"/>
Infrastructure Plan	<input type="checkbox"/>	Preliminary Plan	<input type="checkbox"/>
Minor SP	<input type="checkbox"/>	Construction Plan	<input type="checkbox"/>
Grading Plan	<input type="checkbox"/>	Technical Change	<input type="checkbox"/>

Minor Plat	<input type="checkbox"/>	Final Subd. Plat	<input type="checkbox"/>
BLA/DED/VACA	<input type="checkbox"/>	Family Subd. Plat	<input type="checkbox"/>

PROJECT INFORMATION

PROJECT # _____

PROJECT NAME

SECTION

ADDRESS (IF AVAILABLE)

TOTAL SITE ACREAGE

TAX MAP /PARCEL(S)

ZONING DISTRICT

LOCATION OF PROJECT

APPLICANT/AGENT

Primary Contact Person ☐

NAME

COMPANY

ADDRESS

CITY

STATE

ZIP

PHONE NUMBER

FAX NUMBER

EMAIL ADDRESS

OWNER (Provide attachments if multiple owners)

Primary Contact Person ☐

NAME

COMPANY

ADDRESS

CITY

STATE

ZIP

PHONE NUMBER

FAX NUMBER

EMAIL ADDRESS

PROFESSIONAL (Engineer, Surveyor, etc.)

Primary Contact Person ☐

NAME

COMPANY

ADDRESS

CITY

STATE

ZIP

PHONE NUMBER

FAX NUMBER

EMAIL ADDRESS

Final Subdivision Plat
Review Fee Calculation

*** Total application fee includes ONLY the 1st & 2nd Reviews

***Total application fee is for the administrative process and review of this application, and does not constitute an approval of the Final Subdivision Plat.

A. Base Fee	<u>\$ 1,975.00</u>
B. Lot Fee (_____ Lots) x (\$125/Lot)	<u>\$.00</u>
C. I.T. Review Fee: (Total _____ number of lots) x \$34.00=	<u>\$.00</u>
D. Utilities Review Fee (if COUNTY water/sewer)	<u>\$ 400.00</u>
E. Transportation Review Fee	<u>\$ 310.00</u>

SUBTOTAL \$ _____ .00

Per Ordinance O12-19, a 2.75% technology fee will be assessed and collected on the total fees for all new and resubmitted applications until June 18, 2017. + 2.75% \$ _____

GRAND TOTAL \$ _____

All 3rd and subsequent Review Fees are as follows:

Planning & Zoning	(\$1,050.00) + \$65.00/per lot
Transportation	(\$100.00)
Utilities	(\$95.00)

Per Ordinance O12-19, a 2.75% technology fee will be assessed and collected on the total fees for all new and resubmitted applications until June 18, 2017.

***Major Revisions/Correction- Base Fee Only	<u>\$ 4,500.00</u>
(No other fees required in revisions/corrections, except for technical fee)	123.75

GRAND TOTAL \$ 4,623.75

Per Ordinance O12-19, a 2.75% technology fee will be assessed and collected on the total fees for all new and resubmitted applications until June 18, 2017.

***Minor Revisions/Correction- Base Fee Only	<u>\$ 2,100.00</u>
(No other fees required in revisions/corrections, except for technical fee)	57.75

GRAND TOTAL \$ 2,157.75

THE ABOVE FEES ARE TO BE MADE PAYABLE TO: **COUNTY OF STAFFORD**

Statements of Understanding

I, as owner/co-owner of the property subject to this application, do hereby certify that I have read and understood the requirements of this submission of Final Subdivision Plat for review and approval as provided under the Subdivision Ordinance, Chapter 22 of the Stafford County Code, and further, that this submittal is in compliance with the requirements and applicable provisions of the Zoning Ordinance for the zoning districts in which this project is located.

Signature of Owner/Co-Owner	Printed Name	Date
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Signature of Owner/Co-Owner	Printed Name	Date
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Signature of Owner/Co-Owner	Printed Name	Date
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I, as applicant or agent for the owner(s) of the property subject to this application, do hereby certify that I have submitted this application for Final Subdivision Plat for review and approval as provided under the Subdivision Ordinance, Chapter 22 of the Stafford County Code, and further, that this submittal is in compliance with the requirements and applicable provisions of the Zoning Ordinance for the zoning districts in which this subdivision is located.

Signature of Applicant/Agent	Printed Name	Date
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SUBDIVISION FINAL PLAT CHECKLIST

Completed	N/A	CONTENT	Completed	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	22-87.A GRAPHIC SCALE: 1"=100'	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.7 DEDICATIONS, INCLUDING ESMTS
<input type="checkbox"/>	<input type="checkbox"/>	22-87.A NORTH ARROW	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.8 EASEMENT WIDTH
<input type="checkbox"/>	<input type="checkbox"/>	22-87.A SHEET SIZE: 17" X 21"	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.8 EASEMENT LOCATION
<input type="checkbox"/>	<input type="checkbox"/>	22-87.B KEY PLAN & MATCH LINES	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.8 EASEMENT OWNERSHIP
<input type="checkbox"/>	<input type="checkbox"/>	22-87.C BOUNDARY SURVEY/GEODET	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.8 EASEMENTS USE
<input type="checkbox"/>	<input type="checkbox"/>	22-87.D CURVE DATA/TABLE	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.8 VDOT EASEMENT NOTE
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.1 VIC.MAP/1"=2,460'	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.9.A CERTIFICATE TITLE
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.1. SUBDIVISION NAME	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.9.A NAME/ADRS PLATPREP
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.1 DATE,INCL REVISIONS	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.9.B SURVEYORS CERTIFIC
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.1 NAME/ADDRESS OWNER	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.9.C OWNRS CONSNT& DED STMT
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.1 NAME/ADDRESS SUBDR	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.9.D CERTIFICATE APRVL
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.1 TOTAL ACRES OF PARENT PCL	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.9.D. AGENT SIGNATURE BLOCK
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.1 ZONING	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.9.D. HEALTH DEPT SIGNATURE BLOCK
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.2 ACREAGE/OPEN SPACE	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.9.D. VDOT SIGNATURE BLOCK
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.2 AREA OF EACH LOT	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.10 ADDRESS OF EACH LOT
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.2 ASSESSOR'S PARCEL NO	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.11 PRIVATE WELL NOTE
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.2 LOT BEARING/DISTANCE	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.12.A LOSE NOTE
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.2 LOT TABULATION			22- OTHER INFO REQ
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.2 NUMBERED CONSECUTIVELY	<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.12.B HEALTH DEPT NOTE
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.2 NUMBER OF LOTS	<input type="checkbox"/>	<input type="checkbox"/>	22-67 MATCH PRELIM/TECH CHANGE
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.2 SECTION NUMBER	<input type="checkbox"/>	<input type="checkbox"/>	22-108 RESTRICTED ACCESS ENTRANCES
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.3 FLOOD PLAIN BOUNDARY	<input type="checkbox"/>	<input type="checkbox"/>	22-118 UTILITIES
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.4 GPS BEARING WHEN REQ	<input type="checkbox"/>	<input type="checkbox"/>	22-118.1 URBAN SERV AREA/SEWER
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.4 GPS NOTES	<input type="checkbox"/>	<input type="checkbox"/>	22-118.4 &5 ONSITE WATER & SEWER
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.4 TWO CNTRL MNMNTS/PLAT	<input type="checkbox"/>	<input type="checkbox"/>	22-141 PRE-EXISTING LOTS
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.A LR# OR ROUTE # OF ST.	<input type="checkbox"/>	<input type="checkbox"/>	22-142 LOT SIZE
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.A EXISTING STREETS	<input type="checkbox"/>	<input type="checkbox"/>	22-143 5:1 SHAPE RATIO/ELONGATED
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.A EXISTG STREET LOCATION	<input type="checkbox"/>	<input type="checkbox"/>	22-144 LOT FRONTAGE
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.A EXISTG STREET DIMENSION	<input type="checkbox"/>	<input type="checkbox"/>	22-145 CORNER LOT (ZONING 28-38)
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.A PROPOSED STREETS	<input type="checkbox"/>	<input type="checkbox"/>	22-146 SIDE LOT LINES
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.A STREET NAMES	<input type="checkbox"/>	<input type="checkbox"/>	22-147 OUT LOTS NOT PERMITTED
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.B TEMP CUL-DE-SAC	<input type="checkbox"/>	<input type="checkbox"/>	22-148 SEPARATE OWNERSHIP
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.C PAE NOTES	<input type="checkbox"/>	<input type="checkbox"/>	22-149 DOUBLE FRONTAGE
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.C VDOT EASEMENT NOTE	<input type="checkbox"/>	<input type="checkbox"/>	22-151 REVERSE FRONTAGE OR SHARED D/W
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.C.1 LOTS SRVD BY PAE	<input type="checkbox"/>	<input type="checkbox"/>	22-152.A SWM REQ IN OPEN SPACE
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.C.2 PC APRVL DAT/PAE	<input type="checkbox"/>	<input type="checkbox"/>	22-152.B FACILITY REQ STM DRN ESMT
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.C.3 INELIGIBLE/VDOT	<input type="checkbox"/>	<input type="checkbox"/>	22-152.C SWM ACCESS/EASM
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.C.3 PAE MAINT NOTE	<input type="checkbox"/>	<input type="checkbox"/>	22-153 LOT REQ FOR BUFFERS
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.5.E PRMY HWY ROW NOTE	<input type="checkbox"/>	<input type="checkbox"/>	22-156 BLOCK LENGTH
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.6 RESTRICTIONS REFERENCED	<input type="checkbox"/>	<input type="checkbox"/>	

Completed	N/A	22- OTHER INFO REQ
<input type="checkbox"/>	<input type="checkbox"/>	22-157 BLOCK WIDTH
<input type="checkbox"/>	<input type="checkbox"/>	22-158 BLOCK ORIENTATION
<input type="checkbox"/>	<input type="checkbox"/>	22-167 ROW DEDICATION
<input type="checkbox"/>	<input type="checkbox"/>	22-177 TH ACCESS
<input type="checkbox"/>	<input type="checkbox"/>	22-179 STREET DEDICATION TO PUBLIC USE
<input type="checkbox"/>	<input type="checkbox"/>	22-186 VDOT STANDARDS SERVING 3 OR >
<input type="checkbox"/>	<input type="checkbox"/>	22-187 STREET CONTINUATION
<input type="checkbox"/>	<input type="checkbox"/>	22-187 STREET ALIGNMENT
<input type="checkbox"/>	<input type="checkbox"/>	22-188 STREET ANGLE
<input type="checkbox"/>	<input type="checkbox"/>	22-189 STREET HALF/CENTER LINE
<input type="checkbox"/>	<input type="checkbox"/>	22-190 STREET ACCESS CONNECTIONS
<input type="checkbox"/>	<input type="checkbox"/>	22-191.A # LOTS/LENGTH CUL-DE-SAC
<input type="checkbox"/>	<input type="checkbox"/>	22-191.B. TEMPORARY CUL-DE-SAC
<input type="checkbox"/>	<input type="checkbox"/>	22-212 MIN WIDTH ROW
<input type="checkbox"/>	<input type="checkbox"/>	22-213 STREET NAMES
<input type="checkbox"/>	<input type="checkbox"/>	22-217 SHARED D/W NOTE

REQUIRED MONUMENTS

<input type="checkbox"/>	<input type="checkbox"/>	22-132.A PROP CRNRS SET BY LS
<input type="checkbox"/>	<input type="checkbox"/>	22-132.B. CNTRL MONUMENT ESMT
<input type="checkbox"/>	<input type="checkbox"/>	22-132.B.4 CONTROL MONUMENTS
<input type="checkbox"/>	<input type="checkbox"/>	22-132.B.5 EXIST MONUMENT USE

Completed	N/A	28 - OTHER INFO REQ
<input type="checkbox"/>	<input type="checkbox"/>	28-35 TABLE 3.1 LOT WIDTH/AREA
<input type="checkbox"/>	<input type="checkbox"/>	28-38 PERFORMANCE REGULATIONS
<input type="checkbox"/>	<input type="checkbox"/>	28-39.I.34 LOC EXISTING ITEMS
<input type="checkbox"/>	<input type="checkbox"/>	28-39.O LOC OF CEMETERIES
<input type="checkbox"/>	<input type="checkbox"/>	28-62 CRPA
		DEVELOPER CONTRIBUTION TO OFF-SITE SEWERAGE & DRAINAGE FACILITIES
<input type="checkbox"/>	<input type="checkbox"/>	22-168 UTIL PRO-RATA SHARE
		FILING
<input type="checkbox"/>	<input type="checkbox"/>	22-86.A TEN COPIES OF PLATS
<input type="checkbox"/>	<input type="checkbox"/>	2 COPIES OSE SOIL REPORTS
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.13 KEY MAP 1"=400'
<input type="checkbox"/>	<input type="checkbox"/>	22-87.E.14 DXF FORMAT FILE
<input type="checkbox"/>	<input type="checkbox"/>	APPLICATION COMPLETED
<input type="checkbox"/>	<input type="checkbox"/>	CONSTRUCTION PLAN PREV SUBMITTED AP#
<input type="checkbox"/>	<input type="checkbox"/>	CONSTRUCTION PLAN SIMULTANEOUSLY SUBMITTED
<input type="checkbox"/>	<input type="checkbox"/>	22-88.A. CERTIFIED COST ESTIMATES

I, _____ duly licensed/certified in the Commonwealth of Virginia, do hereby certify that the plat submitted with this checklist conforms to the requirements of the Stafford County Code. I further certify that the above checklist is both complete and accurate.

Signature

Certification